

SENATE BILL 1767

By Bailey

AN ACT to amend Tennessee Code Annotated, Title 38;
Title 63 and Title 68, relative to the administration
of epinephrine in emergency circumstances.

WHEREAS, it is the intent of the General Assembly that law enforcement officers serving as first responders be prepared to treat allergic anaphylactic reactions; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 63, Chapter 1, Part 1, is amended by adding the following as a new section:

(a) As used in this section:

(1) "Epinephrine kit" means a dose of epinephrine and a device for administering the dose of epinephrine;

(2) "Law enforcement agency" has the same meaning as in § 39-13-519;

(3) "Law enforcement officer" has the same meaning as in § 39-11-106;

and

(4) "Pharmacist" has the same meaning as in § 63-10-204.

(b) A law enforcement agency may develop an epinephrine-administration protocol in accordance with this section. The epinephrine-administration protocol shall be developed by a physician licensed under chapter 6 or 9 of this title.

(c) For any law enforcement agency that has developed a epinephrine-administration protocol in accordance with subsection (b), a health care prescriber may prescribe epinephrine kits in the name of the law enforcement agency and a pharmacist may dispense epinephrine kits to the law enforcement agency pursuant to a prescription issued in the name of the law enforcement agency.

(d) In coordination with the appropriate local emergency medical services providers and in accordance with this section, a law enforcement officer may possess an epinephrine kit prescribed to the law enforcement officer's law enforcement agency for the purpose of administering epinephrine in an emergency situation to treat anaphylactic reactions if authorized to do so by the officer's law enforcement agency.

(e) A law enforcement officer may administer epinephrine to treat an anaphylactic reaction if the law enforcement officer is authorized to administer epinephrine by the officer's law enforcement agency, has completed the training required by subsection (f) within the past twelve (12) months, and administers the epinephrine in accordance with a protocol adopted by the officer's law enforcement agency in accordance with subsection (b).

(f)

(1) A law enforcement agency shall require that each officer that is authorized to administer epinephrine receive training from qualified medical personnel at least annually. The training shall include:

(A) Patient assessment, including signs and symptoms of anaphylactic shock;

(B) Universal precautions;

(C) Rescue breathing;

(D) Seeking medical attention; and

(E) The use of intramuscular epinephrine as detailed in the protocol described in subsection (b).

(2) A law enforcement agency shall keep a record of each officer's participation in training pursuant to this subsection (f).

(g)

(1) A physician shall not be held liable for any injury to an individual who is harmed by the administration of the epinephrine prescribed by the physician

pursuant to this section unless the physician acted with reckless disregard for safety.

(2) A law enforcement officer shall not be held liable for any injury to an individual who is harmed by the administration of epinephrine by the law enforcement officer pursuant to this section unless the law enforcement officer acted with reckless disregard for safety.

(3) A law enforcement agency shall not be held liable for any injury to an individual who is harmed by the administration of epinephrine by a law enforcement officer employed by the law enforcement agency pursuant to this section unless the law enforcement agency acted with reckless disregard for safety.

(h) A law enforcement officer that administers epinephrine in accordance with this section shall file a record of the event with the appropriate local emergency medical services agency. The record shall include the signs, symptoms, therapies, response, and disposition of the event.

SECTION 2. This act shall take effect July 1, 2016, the public welfare requiring it.